

# Spring 2019 Workshop Registration Form

Registration Fee: \$50 per person per workshop

For best results, download and fill out this form

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## Traffic Signs & Pavement Markings

March 26—Herkimer Cty

March 27—Greene Cty

March 28—Putnam Cty

April 2—Cortland Cty

April 3—Steuben Cty

April 4—Niagara Cty

## Identifying and Reducing Legal Liability: A Guide for Highway and Public Works Departments

April 16—Suffolk Cty

April 17—Dutchess Cty

April 18—Delaware Cty

## Asphalt Paving Principles

April 23—Franklin Cty

April 24—Saratoga Cty

April 25—Ulster Cty

May 14—Oswego Cty

May 15—Yates Cty

May 16—Erie Cty

## Roadway and Roadside Drainage

April 23—Orleans Cty

April 24—Seneca Cty

April 25—Broome Cty

May 14—Schoharie Cty

May 15—Washington Cty

May 16—St. Lawrence Cty

## Surveying

May 7—Wyoming Cty

May 8—Tioga Cty

May 9—Sullivan Cty

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Today's Date: \_\_\_\_\_

### Registrant #1

Last 4 digits of SSN: \_\_\_\_\_ (optional) Special dietary request? \_\_\_\_\_

First name: \_\_\_\_\_ MI: \_\_\_\_\_ Last name: \_\_\_\_\_ Suffix: \_\_\_\_\_

Title: \_\_\_\_\_ Organization: \_\_\_\_\_

Mailing address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_ Ext: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Fax #: \_\_\_\_\_ Email: \_\_\_\_\_

Are you a new highway or public works official? Yes No

Name of outgoing highway or public works official: \_\_\_\_\_

Is the person leaving the position staying within the agency? Yes No

If Yes, what is their new title? \_\_\_\_\_

Add me to the CLRP mailing list    Already on mailing list    Email only    Newsletter only    No thanks

### Registrant #2

Last 4 digits of SSN: \_\_\_\_\_ (optional) Special dietary request? \_\_\_\_\_

First name: \_\_\_\_\_ MI: \_\_\_\_\_ Last name: \_\_\_\_\_ Suffix: \_\_\_\_\_

Title: \_\_\_\_\_ Email: \_\_\_\_\_

Add me to the CLRP mailing list    Already on mailing list    Email only    Newsletter only    No thanks

### Registrant #3:

Last 4 digits of SSN: \_\_\_\_\_ (optional) Special dietary request? \_\_\_\_\_

First name: \_\_\_\_\_ MI: \_\_\_\_\_ Last name: \_\_\_\_\_ Suffix: \_\_\_\_\_

Title: \_\_\_\_\_ Email: \_\_\_\_\_

Add me to the CLRP mailing list    Already on mailing list    Email only    Newsletter only    No thanks

